

CITY OF RIVERSIDE

Building & Safety Division

Phone: (909) 826-5697



e Special Inspector's Correction Notice e

Permit Number: _____

Project Name/Address: _____

Inspections Type(s)/Coverage: _____

☐ Continuous

☐ Periodic

Time Inspections Began: _____ Time Inspection Ended: _____

List items requiring correction, correction of previously listed items, and previously listed uncorrected items:

Comments: _____

Signed: _____ Date: _____

Print Name: _____ City I.D. Number: _____

Note: This Report is to remain at the Job Site with the Contractor for review by the City's Building Inspector